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| NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES | | Docket Number (Optional) 247171-000426USP1 | |
| <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> In re Application of David J. Wendell <i>et al.</i> </div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; padding-bottom: 5px;"> <div style="width: 60%;">Application Number 10/798,669</div> <div style="width: 40%;">Filed March 11, 2004</div> </div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;"> For OPTICAL COIN DISCRIMINATION SENSOR AND COIN PROCESSING SYSTEM USING THE SAME </div> <div style="display: flex; justify-content: space-between; border-top: 1px solid black; padding-top: 5px;"> <div style="width: 60%;">Art Unit 3653</div> <div style="width: 40%;">Examiner Michael C. McCullough</div> </div> | | | |
| <p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ 500.00</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>50-4181</u>. I have enclosed a duplicate copy of this sheet.</p> <p><input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is attached.</p> <p>I am the</p> <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 60%;"> <input type="checkbox"/> applicant /inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>42,988</u> <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____ </div> <div style="width: 35%; text-align: center;">  _____ Signature _____ William D. Pegg Typed or printed name _____ (312) 425-3900 Telephone number _____ August 15, 2007 Date </div> </div> | | | |